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Pages: 24 (including this page)

To: USPTO

From: Cynthia K. Nicholson

Fax No.: 571-273-8300

Subject: Amendment

Comments:

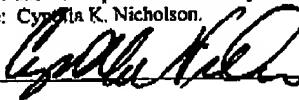
Title: A SYSTEM PROVIDING EVENT PRICING FOR ON-LINE ...

Attached please find:

- (1) Transmittal form;
- (2) Fee transmittal form;
- (3) Petition for Extension (1 month); and
- (4) 20-page Amendment

CERTIFICATE OF FACSIMILE TRANSMISSION

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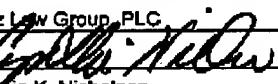
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AUG 28 2007

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/741,908
		Filing Date	12/22/2000
		First Named Inventor	PRICE
		Art Unit	3639
		Examiner Name	Shannon S. SALIARD
Total Number of Pages In This Submission		Attorney Docket Number	69.001

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
		Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Posz Law Group, PLC		
Signature			
Printed name	Cynthia K. Nicholson		
Date	28 August 2007	Reg. No.	36,880

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Signature			
Typed or printed name	Cynthia K. Nicholson	Date	28 August 2007